

## STANDARD APPLICATION FORM FOR LAND DISTURBING ACTIVITIES STORMWATER PERMITTING

SECTION 1 - Administrative information (To Be Completed By All Applicants) Date: (MM/DD/YYYY) 05/10/2006 Facility or project name: SOUTH MORGAN'S POINT ROAD EXTENSION County: Charleston City/Town: MOUNT PLEASANT
Location (elso shown on location map): INTERSECTION OF US HWY-17 AND SOUTH MORGAN'S POINT ROAD
Latitude: 32d 51' 54" Longitude: 79d 47' 05" Latitude: 32d 51' 54" USGS Quad Name: FORT MOULTRIE Tax map #: 500-00-00-021 Nearest receiving water body: <u>COPAHEE SOUND</u>
Distance to nearest receiving water body: <u>7 MILES</u>
Ultimate receiving water body: <u>ATLANTIC OCEAN</u> If yes, have they been delineated? yes Are there any wetlands located on the property? ves Are any federally jurisdictional wetlands being impacted by this project? no If yes, has a Corps permit been issued? N/A

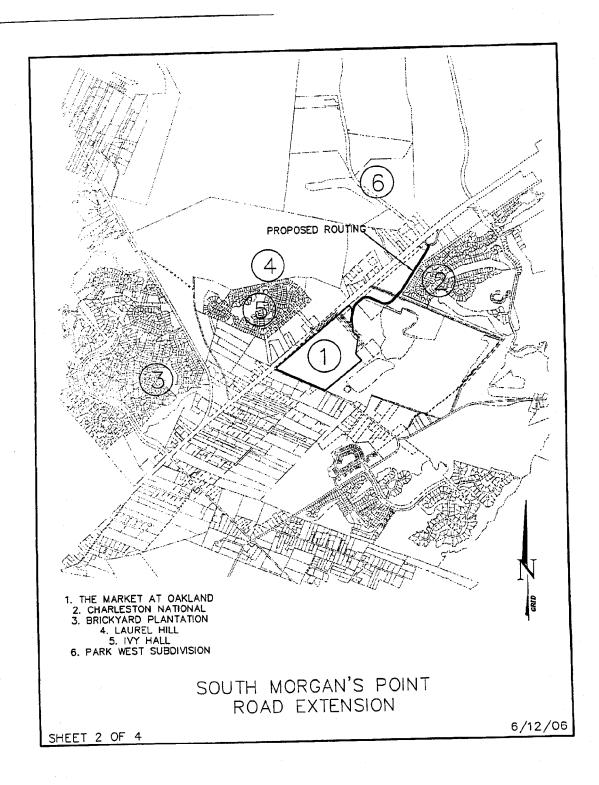
Corps permit #: N/A Are any federally non-jurisdictional (state) wetlands being impacted by this project? yes

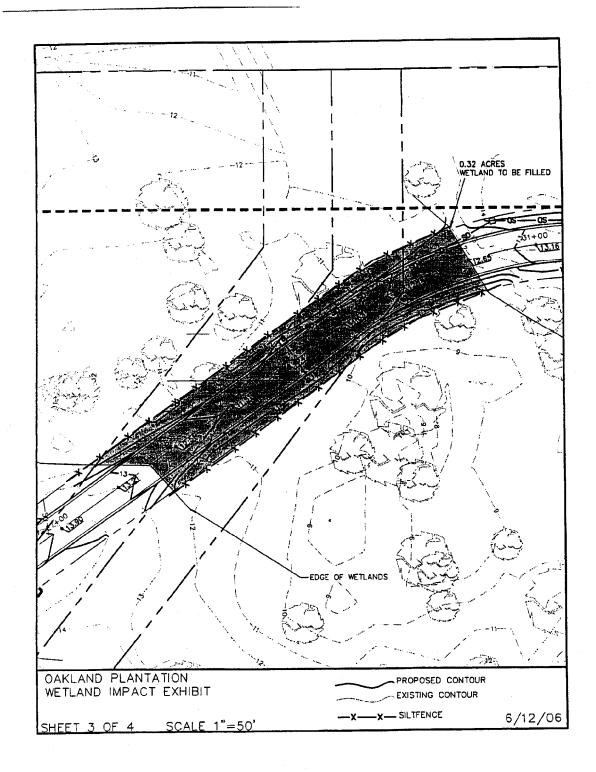
What is the total acreage of federally jurisdictional and state wetland impacts? 0.00 (Juris.) 1 (Juris.) 2.37 (Non-juris.) On an 8 1/2" X 11" copy of a site plan indicate the wetland impacts and the proposed mitigation. Are there any existing flooding problems in the downstream watershed? no Property owner of record: OAKLAND ASSOCIATES
Address: P.O. BOX 868 City:
Phone (day): (843) 884-4153 (night): Zip: 29465 State: South Carolina City: MT. PLEASANT (fax): (843) 884-8853 Person financially responsible for the land disturbing activity: AVTEX COMMERICAL PROPERTIES (if different than above) City: GREENVILLE Address: P.O. DRAWER 10287 State:South Carolina Zip:29603 (night): (fax): (864) 233-0639 Phone (day): (864) 271-1900 Agent or day-to-day contact (if applicable): N/A State Zip: Address: City (fax): Phone (day): (night): Plan preparer, engineer, or technical representative: <u>CIVIL SITE ENVIRONMENTAL</u>
Address: <u>668 MARINA DRIVE</u> <u>City: <u>CHARLESTON</u> State:</u> State: South Carolina Zip:29492 Phone (day): (843) 849-8945 (night): (fax): (843) 849-8974 Contractor or operator (if known): <u>CHANDLER CONSTRUCTION SERVICES</u>
Address: <u>1150 HUNGRYNECK BLVD</u> City: <u>MT. PLEASANT</u> State: South Carolina Zip: 29464 (night): Phone (day): (843) 767-0096 (fax): (843) 767-0760 \_ Surface area of land disturbance (acres): 3.90 10. Size, total (acres): 4,30 11. Start date:(MM/DD/YYYY) 08/01/2006 Completion date:(MM/DD/YYYY) 11/01/2006 SECTION 2A - For Projects That Disturb Less Than One (1) Acre Which Are Not Part of a Larger Common Plan for Development or Sale and Which Are Not Located Within ½ Mile of a Receiving Waterbody in the Coastal Counties Description of control plan to be used during construction. (Must also be shown on plan sheets or sketch drawing): This plan does not have to be prepared by a professional engineer, tier b surveyor, or a landscape architect and there is NO STATE REVIEW FEE associated with this type of project. On a case-by-case basis, an NPDES permit with a \$125

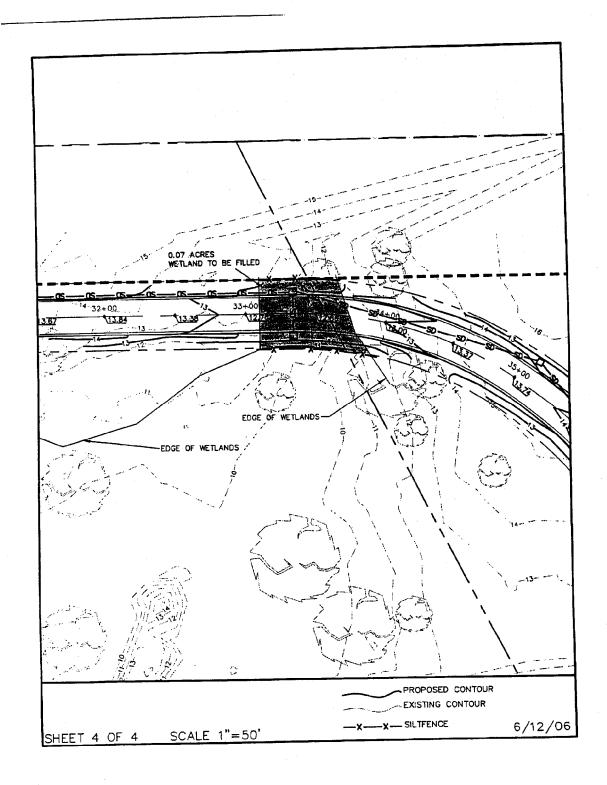
13. For this form to be complete, the applicant must sign item 23.

DHEC 3306 (08/2003)

4.	Description of control plan to be used during construction	n. (Must also be shown on plan sheets or sketch drawing):
	This plan must be prepared by a professional er	ngineer, tier b land surveyor, or a landscape architect
5.	Fee: \$125 NPDES General Permit coverage fee applies	s, exempt from state review fee.
6.	SIC code:	Is the site located on Indian lands?
7.	For this form to be complete, the applicant must sign ite	ms 23 and 24 and the plan preparer must sign item 25.
	CTION 2C - For Projects Disturbing More Than Two (2) in for Development or Sale	Acres and/or Projects That Are a Part of a Larger Common
8.	Is this part of a larger common plan for development or sale? N/A	
	If yes, what is the state permit number for the previous approval? N/A What is the NPDES permit coverage number? N/A	
	Has a Notice of Termination (NOT) been submitted for the	NPDES permit coverage? <u>N/A</u>
9.	The stormwater management and sediment and erosion or engineer, tier b land surveyor, or a landscape architect.	ontrol plan for projects of this size must be prepared by a profession
0.	SIC code: 1611 Highway and street construction	Is the site located on Indian lands? NO
1.	Type of project and fees (please choose the type of activity):  a. Federal - State - Local - School (exempt from State fees, \$125 NPDES fee applies)  b. Industrial - Commercial - Residential - Part of a larger common plan for development or sale [\$100 per disturbed acre, maximum \$2000 State fee per project PLUS \$125 NPDES permit fee.]	
	[\$100 per disturbed acre, maximum \$2000 Sta	rate fee per project <i>PLUS</i> \$125 NPDES permit fee.]  Fee: \$515.00
	[\$100 per disturbed acre, maximum \$2000 State Project Type: Commercial For this form to be complete, the applicant must sign items 23 STION 3 - Signatures and Certifications  I hereby certify that all land disturbing construction and a pursuant to and in keeping with the terms and conditions will be assigned to the project for day-to-day control. I henvironmental Control and/or the local implementing agr	Fee: \$515.00  and 24 and the plan preparer must sign item 25.  associated activity pertaining to this site shall be accomplished to the approved plans. I also certify that a responsible person ereby grant authorization to the Department of Health and ency the right of access to the site at all times for the purpose of
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<b>EC</b> 3.	[\$100 per disturbed acre, maximum \$2000 State Project Type: Commercial for this form to be complete, the applicant must sign items 23 STION 3 - Signatures and Certifications  I hereby certify that all land disturbing construction and a pursuant to and in keeping with the terms and conditions will be assigned to the project for day-to-day control. I h Environmental Control and/or the local implementing agon site inspections during the course of construction and the land disturbing activity.  Printed Name Owner/Person Financially Responsible  I certify under penalty of law that I have personally examapplication and all attachments and that, based on my information contained in the application, I believe that the are significant penalties for submitting false information,  Printed Name Owner/Person Financially Responsible  Designer Certification - One copy of the plans, all specification submitted signifying that I accept responsibility for the deand belief that the design is consistent with the requirements.	Fee: \$515.00  and 24 and the plan preparer must sign item 25.  associated activity pertaining to this site shall be accomplished to of the approved plans. I also certify that a responsible person ereby grant authorization to the Department of Health and ency the right of access to the site at all times for the purpose of the perform maintenance inspections following the completion of the person Financially Responsible  Signature  Owner/Person Financially Responsible for obtaining the einformation is true, accurate and complete. I am aware that the including the possibility of fine and imprisonment.  Signature  Owner/Person Financially Responsible  ccations and supporting calculations, forms, and reports are I have placed my signature and seal on the design documents sesign of the system. Further, I certify to the best of my knowledgents of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as







STATE OF THE STATE FORT MOULTRIE QUADRANGLE SOUTH CAROLINA 7.5 MINUTE SERIES (TOPOGRAPHIC MC CLELLANVILLE 24 MI 12 380 QOO FEET \$2°52′30" Quad Name Ft. Mouthe Project Name Suth Mogan TMS#